

477-000-047 – Examples: Transitional Medical Assistance

If a family qualifies for TMA (Transitional Medical Assistance), they are entitled to the first six months of eligibility without regard to income. However, beginning with Month 7 the family is subject to an income test. The family loses TMA eligibility if the countable earned income is greater than 185% FPL for the appropriate household size.

The countable income is determined by averaging the gross monthly earned income and subtracting the cost of child care (including that amount paid by Child Care Assistance). No other disregards are allowed.

Note: Unearned income is not considered in TMA budgeting. The Quarterly Report Forms (QRF) ask for this but it is not needed.

In order to determine the household's income, earnings and child care costs from the first three months of TMA are reported via a QRF (Quarterly Report Form). Income from the first QRF (for Months 1, 2 and 3) are used to determine whether the family is eligible for TMA beyond Month 6. Assuming that the QRF and income verification are provided, there are three possible outcomes:

1. The countable income from Months 1 through 3 is greater than 185% FPL and is reflective of the current employment situation, TMA eligibility does not exist beyond Month 6 and the TMA case should be closed allowing for timely and adequate notice. Eligibility for Medicaid should be explored.
2. The countable income is less than 100% FPL and all TMA unit members remain eligible for TMA without any premium.
3. The countable income falls between 100% and 185% FPL. The premium, may apply to all TMA unit members or only to the adult(s). Since TMA is considered non-MAGI, we will run the budgets with the children as non-filers to place them in a MAGI child program (if applicable) and the adults would remain in the TMA premium. If the children are not eligible for the MAGI child program then the whole unit would be included in the TMA premium. TMA premium amounts are found below. The household must be notified of their premium.

WHO PAYS THE PREMIUM? The TMA premium may be required only for the adult(s) in the family; it may also be required for the child(ren). This will depend on the income, family size, composition of the family, and ages of the children. Another factor that must be considered is whether the child(ren) are covered by creditable health insurance. If the children pass eligibility for Medicaid or CHIP, they would not have a premium.

If the parent(s) choose to have a share of cost (SOC) in lieu of the TMA premium, all eligibility factors for medically needy must be met. For example, deprivation, a medical need, resources, a valid application.

Before approving a TMA premium, review each individual for continuous eligibility.

Note: Please do not close the TMA case if the client has not paid their premium. The client will not receive Medicaid services for that month if the premium is not paid.

Alaskan Natives and American Indians who provide verification of their tribal affiliation are not required to pay a premium. This determination is handled by Central Office.

Example 1: Household consists of Mom (age 23) and one child, age 4. The first QRF indicates that the countable monthly income is \$1,300. Mom does carry health insurance on both herself and her child. One hundred percent FPL for a two-person household is \$1,293, so this family may be subject to a TMA premium. The last eligibility review was completed five months ago.

Factors to Consider:

- ☐ This is a single-parent household, so deprivation exists for Mom.
- ☐ The child is under age 6 so would be budgeted at 145% FPL. CHIP is not an option due to the health insurance coverage.
- ☐ The last eligibility renewal was less than six months ago, but because it was not the initial determination, the child is not assured of any period of continued eligibility so may be subject to a premium along with Mom, if the child fails the applicable Medicaid category.

Result: The Mom in this case must make a decision. The income exceeds the guidelines for a household size of two, so she would be subject to a SOC if we were to close the TMA and run her through “regular” Medicaid budgeting. The income is less than 145% FPL for two, so the child would remain eligible without a SOC. Mom would remain on TMA with a premium while the child would be eligible for Medicaid.

Example 2: Household consists of a married couple with two children, ages 16 and 14. Both parents work and the QRF shows their combined gross earned income to be \$2,900 per month. TMA is entering Month 7. The countable income exceeds 100% FPL for a four-person household, yet it is less than 213% FPL. The children are covered by creditable health insurance.

Factors to Consider:

- ☐ The parents are subject to the 100 Hour Rule, so if we want to cover them we would need to keep the TMA case open or have an incapacity determination from SRT.
- ☐ Regardless of the 100 Hour Rule, the family’s countable income exceeds the medically needy income level (MNIL) for four (the parent’s income standard) and also exceeds 133% FPL for four (the children’s income standard).
- ☐ Although the countable income is less than 213% FPL, we cannot close the parents and run the children in CHIP because the children are insured.

Result: In this case, all four family members are subject to the TMA premium. The premium amount is based on the chart listed below.

Example 3: Single parent mother, age 28 with one child, age 9. Household has been on TMA for six months as Mom is employed full-time. The QRF shows that Mom earns \$1,400 per month and pays no child care. Mom does not have health insurance coverage on herself or her child.

Factors to consider:

- ☐ This is a single-parent household, so deprivation exists without applying the 100 Hour Rule.
- ☐ Mom’s countable income falls between 100% and 185% FPL, so she would appear to be subject to a TMA premium.
- ☐ Mom’s income clearly exceeds the MNIL for two, so the result would be a large SOC.
- ☐ There is no health insurance coverage and the income is below 213% FPL, so the child would be Medicaid eligible.

Transitional Medical Timeline

The Medicaid client calls to report that she has found a job. The budget is updated and the client fails Parent/Caretaker Relative group. The client has received Medicaid (without a Share of Cost) in three of the previous six months.

Note: While earnings (and cost of child care as appropriate) must be reported on a quarterly basis completion and/or return of the Quarterly Report Form (QRF) is NOT an eligibility requirement. The client may only provide the requested information required on the form.

The following is a "timeline" example illustrating TMA notice and reporting requirements:
August 10: The client is determined ineligible due to earnings. Staff sends notice advising the client that Transitional Medical begins effective 9/2013. N-FOCUS sets the TMA Begin Date as 09/2013.

MONTH 1 - September; 1st month of TMA. No action necessary.

MONTH 2 - October; 2nd month of TMA. No action necessary.

MONTH 3 - November; 3rd month of TMA; the first QRF is mailed to the client at the end of this month. The first Quarterly Report Form is due by the 10th day of month 4 (December).

MONTH 4 - December; 4th month of TMA; the first QRF is due by the 10th. No action is REQUIRED at this point if the QRF is not received timely.

MONTH 5 - January; 5th month of TMA. No action necessary.

MONTH 6 - February; 6th month of TMA; the 2nd QRF is mailed to the client at the end of this month. Use income from months 1, 2, & 3 to calculate the budget for month 7.

1st quarter's report of earnings received

Compute budget (income/child care costs)

Compare result to 185% FPL

Income < 185% FPL Income > 185% FPL

TMA continues.

Subject to premium if income exceeds 100% FPL.

FPL.

1st quarter's report NOT received

CLOSE CASE FOR MONTH 7

Case manager must send timely notice

Note: If the first quarter's earnings are received within 90 days of the closure date, the closure is lifted and TMA continues.

MONTH 7 - March; 7th month of TMA; the 2nd QRF is due by the 10th. Use income from months 4, 5, and 6 to calculate budgets for months 8, 9 & 10.

2nd quarter's report of earnings received

Compute budget (income/child care costs)
Compare result to 185% FPL

2nd quarter's report NOT received

CLOSE CASE FOR MONTH 8
Case manager must send timely notice

Income < 185% FPL

TMA continues.

Subject to premium if
income exceeds 100%
FPL.

Income > 185% FPL

Determine eligibility
for MED (must send
timely notice).

Note: If the second quarter's earnings are received within 90 days of the closure date, the closure is lifted and TMA continues.

MONTH 8 - April; 8th month of TMA. No action necessary.

Note: If the second quarter's earnings are received within 90 days of the closure date, the closure is lifted and TMA continues.

MONTH 9 - May; 9th month of TMA; the 3rd QRF is mailed to the client at the end of this month, and is due by 10th day of month 10.

MONTH 10 - June; 10th month of TMA; the 3rd QRF is due by the 10th. Use income from months 7, 8, & 9 to calculate budgets for months 11 and 12. If the income verification is not received, benefits should be closed for month 11.

MONTH 11 - July; 11th month of TMA. No action necessary.

NOTE: If the third quarter's earnings are received within 90 days of the closure date, the closure is lifted and TMA continues. TMA should not continue past month 12.

Good Cause for Failing to Submit Information Required from the QRF: For later QRF reporting due to a client claiming good cause please send the case to Central Office for review.
477 NAC 24-005.08

MONTH 12 - August; 12th month of TMA. At the end of month 12, the TMA case needs to be closed. Determine if a renewal form was sent to the client and what action is needed. Eligibility for Medicaid (but not TMA) shall be determined for all family members. The family cannot receive TMA again until they can meet the "3 out of 6" test again.

Note: Anytime TMA is terminated due to failure to provide verification of income or if the income is in excess of 185% FPL, the children and any medically needy individual must be reviewed for continuous eligibility and eligibility under other programs if all requirements are met (i.e. a current application/renewal form and income are on file, deprivation, etc.)

Transitional Medical Assistance – Examples

TMA Example 1

Parent/caretaker relative (P/CR) Medicaid case becomes ineligible for Medicaid effective April due to increased earnings of the parent/caretaker relative. The unit has been eligible for Medicaid in 3 of the last 6 months preceding the month of ineligibility. The unit is eligible for the first 6 months of the 12 months of TMA.

TMA Example 2

P/CR Medicaid case becomes ineligible for Medicaid effective April due to increased earnings of the parent/caretaker relative. The unit has NOT been eligible to receive Medicaid in 3 of the last 6 months preceding the month of ineligibility. The unit is NOT eligible for TMA. A Medicaid budget would need to be computed to determine if medical eligibility exists for the unit. Review for continuous eligibility and deprivation.

TMA Example 3

P/CR Medicaid case with no earned income becomes ineligible for Medicaid effective April due to increased collection of spousal support. Assuming the unit had received Medicaid in 3 of the last 6 months preceding the month of ineligibility. The unit is not eligible for TMA since the loss of Medicaid was not due to increased earnings. 477 NAC 24-005.05

TMA Example 4

In May, the Medicaid case is in its 2nd month of the 12 months of TMA. The unit consists of Dad, Mom and a child. The child turns 19 in May and graduates from high school. The unit no longer contains a dependent child.

Ten day notice is given and the TMA case is closed effective 6/1. 477 NAC 24-005.05A

TMA Example 5

The unit consists of Mom and 2 children. They are in their 3rd month of the 12 months of TMA. Mom either marries or the father of the children moves back home. Dad is added to the TMA unit. Mom, Dad and the 2 children would remain eligible for at least the first 6 months of the 12 months of TMA. Dad is added to the unit and his income would have to be counted beginning with month 7 of TMA to determine if the unit is under 185% FPL. 477 NAC 24-005.07D

TMA Example 6

Same situation as Example 5, however, the unit is in the 8th month of the 12 months of TMA when Dad returns to the household. Again, Dad is added to the TMA unit and his income is considered when the three month average income is computed in month 10 to determine if the unit is over 185% FPL for months 11 and 12. Dad is also added to the FPL level. If the unit's income remains under 185% FPL, the family remains eligible for TMA. If the unit's income is over the 185% FPL, the case is closed the end of month 10 and the children's eligibility for Medicaid is determined. Review for continuous eligibility and deprivation.

Note: You would already have received Mom's report of her 3 months earnings in month 10. You would look prospectively at Dad's income for months 11 and 12.

TMA Example 7

The unit consists of Mom and 2 children. They are in their 3rd month of the 12 months of TMA. Mom reports she is pregnant and the father of the unborn has moved in with her. The unborn is added to the unit size as an excluded sibling. Paternity cannot be established for an unborn. The alleged father of the unborn is not added to the unit size and his income would not be counted. Mom and the 2 children would remain in TMA. The alleged father would have no medical coverage unless he is age eligible or disabled and would be a unit size of 1.

TMA Example 8

The unit consists of Mom and 2 children. They are in their 8th month of the 12 months of TMA. One of the children becomes pregnant. Mom and the 2 children remain in TMA and the unborn is added to the unit size as an excluded sibling.

TMA Example 9

The unit consists of Dad, Mom, and 2 children. They are in their 7th month of the 12 months of TMA. Dad is determined disabled by SSA. If Dad would be eligible for AABD Medicaid OR if he is receiving SSI, he must be removed from the TMA unit and budgeted as AABD. If Dad would NOT be eligible for AABD Medicaid or is NOT receiving SSI, he would remain in the TMA unit.

Note: If Dad is eligible for an AABD Medicaid, but removing him from the TMA unit causes the TMA unit to be over the 185% FPL, eligibility for all household members is evaluated.

TMA Example 10

The unit is in the 7th month of the 12 months of TMA. Mom reports an increase in her hourly wage that would put the unit over the 185% FPL. The budget would be computed in month 7 based on the new pay schedule to determine eligibility for months 8, 9, and 10.

TMA Example 11

The unit is in their 1st month of the 12 months of TMA. The case is closed at the end of the first month as the family moved to California. The family is only gone for 1 month and then moves back to Nebraska and reapplies for assistance. Mom is still working and the unit is not eligible for Medicaid because of earnings. The unit has been financially eligible to receive Medicaid or grant in 3 of the last 6 months. They would be eligible for TMA. When the case is reopened they would be in month 1 of the TMA.

TMA Example 12

The unit consists of Mom and 3 children. Mom has been sanctioned due to non-cooperation with Child Support Enforcement (CSE) so she is not included in the Medicaid unit. Mom gets a job that puts the Medicaid over income. The unit has received Medicaid for the last 8 months. The three children are eligible for the first 6 months of TMA. When Mom cooperates with CSE she would be added to the TMA unit. If she subsequently refuses to cooperate with CSE while in the TMA unit, no action is taken as cooperation with CSE is not an issue for TMA. 477 NAC 24-005.05

Note: Cooperation with CSE is an eligibility requirement for Medicaid, except if the client is pregnant or already active in a TMA case at the time of the sanction.

TMA Example 13

The unit consists of Mom, 2 children ages 6 and 3, and an unborn. The unit is eligible for the first 6 months of TMA. They are not eligible for TMA beyond Month 6 because the earned income minus cost of child care exceeds 185% FPL. The TMA case is closed and a MED budget is run. Mom's eligibility is based on the Pregnant Women income standard for four, 194% FPL. If mom fails PW eligibility, she is continuously eligible through her post-partum eligibility. Eligibility of the three children, if uninsured, is based on the applicable income standard for each child.

TMA Example 14

The household has been in TMA since June. In November the employed parent is laid off and requests Medicaid. After the Medicaid eligibility is determined, the parent is recalled to work. There is no Medicaid eligibility for December due to earnings. Because the family was financially eligible to receive a grant or ADC related Medicaid only for November, they cannot begin a new TMA cycle starting with December. However, they may resume the original TMA cycle which began in June. December would be month 7 of the original TMA cycle. 477 NAC 24-005.09

TMA Premium Fee Schedule

NEBRASKA HEALTH AND HUMAN SERVICES
TRANSITIONAL MEDICAL ASSISTANCE (TMA)
PREMIUM FEE SCHEDULE

FAMILY SIZE 1		FAMILY SIZE 2		FAMILY SIZE 3		FAMILY SIZE 4		FAMILY SIZE 5		FAMILY SIZE 6		FAMILY SIZE 7		FAMILY SIZE 8 +	
ADJUSTED MONTHLY EARNED INCOME	Fee	ADJUSTED MONTHLY EARNED INCOME	Fee	ADJUSTED MONTHLY EARNED INCOME	Fee	ADJUSTED MONTHLY EARNED INCOME	Fee	ADJUSTED MONTHLY EARNED INCOME	Fee	ADJUSTED MONTHLY EARNED INCOME	Fee	ADJUSTED MONTHLY EARNED INCOME	Fee	ADJUSTED MONTHLY EARNED INCOME	Fee
981 - 1029.99	29	1328 - 1393.99	40	1674 - 1757.99	50	2021 - 2121.99	61	2368 - 2485.99	71	2714 - 2849.99	81	3061 - 3213.99	92	3408 - 3577.99	102
1030 - 1078.99	31	1394 - 1459.99	42	1758 - 1841.99	53	2122 - 2222.99	64	2486 - 2603.99	75	2850 - 2985.99	85	3214 - 3366.99	96	3578 - 3747.99	107
1079 - 1127.99	32	1460 - 1526.99	44	1842 - 1924.99	55	2223 - 2323.99	67	2604 - 2722.99	78	2986 - 3120.99	90	3367 - 3519.99	101	3748 - 3918.99	112
1128 - 1176.99	34	1527 - 1592.99	46	1925 - 2008.99	58	2324 - 2424.99	70	2723 - 2840.99	82	3121 - 3256.99	94	3520 - 3672.99	106	3919 - 4088.99	118
1177 - 1225.99	35	1593 - 1658.99	48	2009 - 2092.99	60	2425 - 2525.99	73	2841 - 2958.99	85	3257 - 3392.99	98	3673 - 3825.99	110	4089 - 4258.99	123
1226 - 1274.99	37	1659 - 1725.99	50	2093 - 2175.99	63	2526 - 2626.99	76	2959 - 3077.99	89	3393 - 3527.99	102	3826 - 3978.99	115	4259 - 4429.99	128
1275 - 1323.99	38	1726 - 1791.99	52	2176 - 2259.99	65	2627 - 2727.99	79	3078 - 3195.99	92	3528 - 3663.99	106	3979 - 4131.99	119	4430 - 4599.99	133
1324 - 1372.99	40	1792 - 1858.99	54	2260 - 2343.99	68	2728 - 2828.99	82	3196 - 3314.99	96	3664 - 3799.99	110	4132 - 4284.99	124	4600 - 4770.99	138
1373 - 1421.99	41	1859 - 1924.99	56	2344 - 2427.99	70	2829 - 2929.99	85	3315 - 3432.99	99	3800 - 3935.99	114	4285 - 4437.99	129	4771 - 4940.99	143
1422 - 1470.99	43	1925 - 1990.99	58	2428 - 2510.99	73	2930 - 3030.99	88	3433 - 3550.99	103	3936 - 4070.99	118	4438 - 4590.99	133	4941 - 5110.99	148
1471 - 1519.99	44	1991 - 2057.99	60	2511 - 2594.99	75	3031 - 3131.99	91	3551 - 3669.99	107	4071 - 4206.99	122	4591 - 4743.99	138	5111 - 5281.99	153
1520 - 1568.99	46	2058 - 2123.99	62	2595 - 2678.99	78	3132 - 3232.99	94	3670 - 3787.99	110	4207 - 4342.99	126	4744 - 4896.99	142	5282 - 5451.99	158
1569 - 1617.99	47	2124 - 2189.99	64	2679 - 2761.99	80	3233 - 3333.99	97	3788 - 3905.99	114	4343 - 4477.99	130	4897 - 5049.99	147	5452 - 5621.99	164
1618 - 1666.99	49	2190 - 2256.99	66	2762 - 2845.99	83	3334 - 3434.99	100	3906 - 4024.99	117	4478 - 4613.99	134	5050 - 5202.99	152	5622 - 5792.99	169
1667 - 1715.99	50	2257 - 2322.99	68	2846 - 2929.99	85	3435 - 3535.99	103	4025 - 4142.99	121	4614 - 4749.99	138	5203 - 5355.99	156	5793 - 5962.99	174
1716 - 1765.99	51	2323 - 2389.99	70	2930 - 3013.99	88	3536 - 3637.99	106	4143 - 4261.99	124	4750 - 4885.99	142	5356 - 5509.99	161	5963 - 6133.99	179
1766 - 1815.00	53	2390 - 2456.00	72	3014 - 3097.00	90	3638 - 3739.00	109	4262 - 4380.00	128	4886 - 5021.00	147	5510 - 5663.00	165	6134 - 6304.00	184